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ABSTRACT

The Diagnostic Targeted Assistance (DTA) process was developed to document the impact of the home intervention aspect of the Home School Partnership Model (HSPM), one of the models for Project Follow Through. HSPM encourages parental involvement in the learning process, in order to foster positive attitudes in parents, educators, and students towards the roles they play in the educative process. HSPM capitalizes on the positive aspects in the home environment as stimuli to learning by primary school pupils. DTA involves the classroom teacher, parents, and paraprofessional coordinators in planning and implementing a program of educational assistance. Criterion referenced tests are used to diagnose reading and mathematics levels for children in kindergarten through grade 3. DTA consists of six phases: (1) surveying the home-family-child environment; (2) diagnosing basic skills learning difficulties; (3) analyzing and classifying learning difficulties; (4) planning diagnostic targeted assistance; (5) implementing the assistance; and (6) evaluating pupil progress and modifying the diagnosis. DTA is in an early stage, and requires further refinement and evaluation. (MH)

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DIAGNOSTIC TARGETED ASSISTANCE (DTA):

A PROCESS TO ASSESS QUALITATIVE AND QUANTITATIVE INVOLVEMENT OF PARENTS IN THE CLARK COLLEGE HOME-SCHOOL PARTNERSHIP MODEL (HSPM)

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Home-School Partnership Model
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INTRODUCTION

The Diagnostic Targeted Assistance (DTA) Process which is the subject of this paper is borne out of a need to document the specific impact of home intervention in the Home-School Partnership Model (HSPM) for Follow Through. It is the result of many years of being subtly coerced by national and local evaluators and program funding legislators to quantify the "qualitative" aspects of parental involvement in the classroom. The old "hard data" - "soft data" question has never been dealt with to the satisfaction of those decision makers who have felt that crucial decisions about whether or not federally funded programs are changing the academic achievement of children. Therefore, evaluation research, for some, has been left to rest on the "time tested" supposedly more stable measures of the standardized test. Sheldon White, et al, 1973 point out that, "They give little useful detail about the programs measured by the tests.----Generally speaking, existing tests favor program activities that directly or indirectly teach the test."

It is recognized in the Home-School Partnership Model that children's proficiency in the skills of reading and mathematics as measured by those tests are necessary today as never before as an edge for coping in their progressive educational experiences. With depressing consistency, these children which are the subject of HSPM research and other federal programs are systematically (willingly or unwillingly) subjected to these "hard data" predictors of success. While we do not consider ourselves a "Basic Skills" Model we do subscribe to the notion that it is unfair to hold our children accountable for skills which may or may not be taught to them. Therefore, the DTA process becomes a means to an end.

Unfortunately, the name of the game in educational research and development is and will for the most part be one of numbers (based on standardized measures) with affective "achievement" serving as fillers.

It is believed in the HSPM that the DTA process and any formal attempt to "make a difference" works when the child perceives learning as emotionally rewarding and thinks of the home and the school as being jointly supportive of his efforts to benefit from a formal education, achievement becomes a realistic goal. Traditionally, however, many parents have felt that they have no meaningful educational roles to play in the school setting, that their suggestions or ideas are unacceptable to professionals. The resulting alienation of parents from the school has severely limited their usefulness as resource persons and partners in the development of their children. It is reasonable to suspect that this limitation has had harmful effects on the attitudes of children toward learning and the school.

WHAT IS THE HOME-SCHOOL PARTNERSHIP MODEL?

The Home-School Partnership Model is one of the existing twenty sponsored models for Follow Through. The Follow Through Program was developed in 1967 to help low-income children in the early primary grades build on a foundation provided by Head Start or similar pre-school programs. The HSPM which is sponsored by Clark College is a program dedicated to parent involvement in education.

This approach recognizes the need to enlist parents as partners in the learning enterprise, in order to reverse the process of alienation. The involvement of parents must be at once active, realistic, and supportive. The positive effects can be expected to be reflected in the entire school

setting to the end that education is viewed by both parents and children as desirable and self-fulfilling.

An end result of education is to effect change in the school itself as a social institution. This particular model proposes that before we can change the institution, we first must effect change in the attitudes of parents, administrators, teachers, and children toward the roles that they play in the educative process.

The primary focus of the Home-School Partnership Model is not on the classroom instructional program, but rather on utilizing positive forces in the home environment as stimuli to learning. As the representatives of home and school plan, work, learn and grow together, and gain acceptance and respect for each other, they gradually bring about positive change in both institutional environments and, inevitably, in pupil achievement.

Incentive for involvement in this motivational approach has three major components:

1. The Parent Aide and Instructional Facilitation Program which employs low income parents as Home Teachers and Parent Interviewers
2. The Adult Education Program which offers parents tutorial services toward literacy, learning for living, individualized training for elementary grades, courses toward high school equivalency status, and career development
3. The Cultural and Extracurricular Program which provides funds for enrichment activities, for special interest classes, and for Follow Through parent/school events.

DIAGNOSTIC TARGETED ASSISTANCE: A PROCESS

The Diagnostic Targeted Assistance (DTA) Process permits the classroom teacher, home teacher and parent to plan and implement a specific program of formal educational assistance for each child by means of criterion-referenced diagnostic testing. The skills which are to be targeted are not necessarily those being taught as a part of the regular classroom instruction, but those skills which will be beneficial for the child at his present level of achievement. The classroom teacher is assisted in every phase of the DTA Process by the home teacher who also serves as a link with the parent. Therefore, this process of individual educational assistance is implemented in both the home and the school.

A link is formed between the home and the school by paraprofessionals who have been trained as home teachers. These teacher aides visit parents in the home and explain to them educational activities which take place in the classroom. They also show parents materials which are being used by their children in school and they teach parents how to make and use learning devices at home. Therefore, parents are able to extend formal education into the home and reinforce learning which is taking place in the school.

The process involves monthly assessments of the targeted assistance program developed for each child. The DTA Process is designed to close the gap between the child's potential and the child's actual level of achievement. This system of targeted assistance serves as a vehicle for the realization and measurement of specific gains in short periods of time. Moreover, it is designed to help overcome identified basic skills difficulties that may be serving as obstacles to the attainment of other skills and/or enrichment potentials that are within the child's immediate range of possibilities.

The Diagnostic Targeted Assitance Process is consistent in its philosophy with some of the more widely accepted theories of learning. Brownell's (1950) Concepts, Principles or Generalizations and Problem Solving and Gagne's (1962 and 1965) Acquisitions of Knowledge Theory and his theory on the conditions of learning concur with this philosophy. Piaget's (1965) Child's Conception of Numbers, Reisman's (1977) Diagnostic Teaching of Elementary School Mathematics and Miller's Reading Kits: Diagnosis and Correction also support the DTA philosophy.

In the 1978-79 school year the DTA Process is being implemented jointly by the Home-School Partnership Model Sponsor staff, the local HSPM site staff and the Local Education Agencies (Metropolitan Public Schools, Nashville, Tennessee and P.S. 133-Manhattan, New York). The Process consists of six major phases: (See Diagram page 6).

I. Survey---Home-Family-Child Environment

II. Diagnose---Basic Skills Learning Difficulties

III. Analyze and Classify---Basic Skills Learning Difficulties

IV. Plan---Diagnostic Targeted Assistance

V. Implement---Diagnostic Targeted Assistance

VI. Evaluate---Child Response to Diagnostic Targeted Assistance and Modify Diagnosis

It must be noted that the process of home intervention is not new to the HSPM but the structure for systematically assessing the impact of parental involvement through a Diagnostic Targeted Assistance Process is in its infancy.

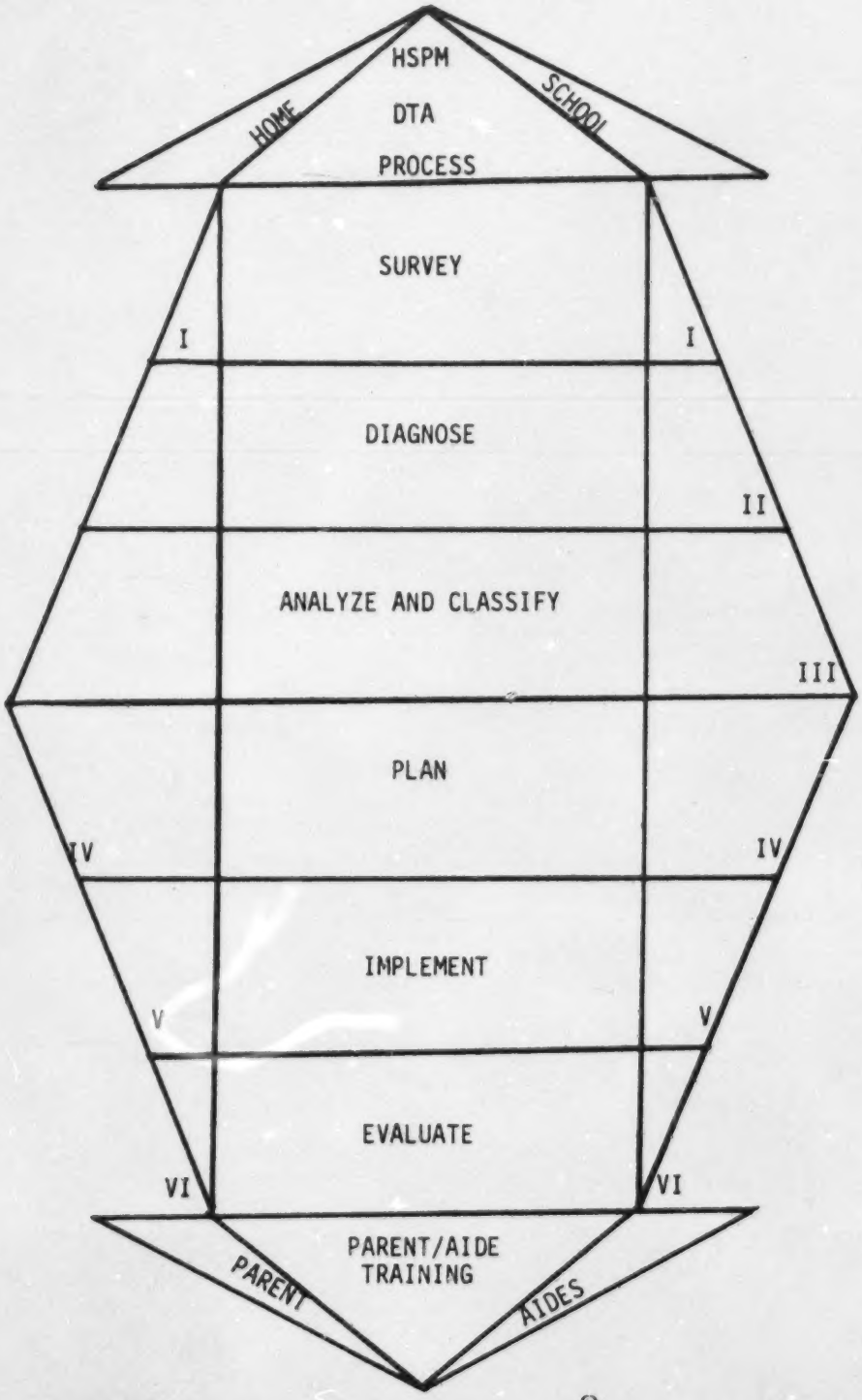
PHASE I - SURVEY-HOME-FAMILY-CHILD ENVIRONMENT

Each child comes to the classroom with motivations, attitudes, beliefs, habits and other behaviors which are a direct result or are formed out of his experiential and cultural background. Classroom teachers must consider these

CLARK COLLEGE

DIAGNOSTIC TARGETED ASSISTANCE PROCESS

HOME-SCHOOL PARTNERSHIP MODEL



factors in order to understand the child's history, his current family situation and his total home environment at the time of entry into the program. The Home-Child -Family Survey is an in-depth instrument which is administered to the parent or guardian of each child upon entry. The information obtained from this instrument is used to develop an initial profile of the child, his family and his home situation. It also serves as the base for future comparisons in which attempts are made to measure changes that might have occured in the child, his family and his home environment as a result of participation in the program and processes sponsored by the HSPM. It is also recognized that children whose experiences have equipped them with rich, varied and well developed concepts, interests and motivation required for progress in reading and mathematics are not equally effective for children whose background may have been the opposite.

The effective utilization of information gleaned from the Home-Child-Family Survey will help classroom teachers and home teachers to understand expectations held by parents and others in the community. The influence of both usually determines how much of an impact an educational program will have on children. Lucille Strain, 1976 suggests that, "Expectations held about methods of instruction, use of the community as a learning resource, nature of homework assignments and even the moral, ethical, and political tendencies in the community often influence the types of objectives that should be given priority in a reading program." When school and community objectives are not in concert or are not sensitive to each others "place" children benefit the least.

The goals of Phase I are as follows:

1. To obtain a detailed and accurate profile of the child, his family and his home environment.

2. To provide the goals, activities and approaches of the HSPM programs and processes to the parent or guardian.

3. To clearly delineate the responsibilities of all parties involved.

4. To acquaint parents or guardians with the persons with whom they will be having frequent direct contact.

These goals are accomplished by the following means:

1. Administering the Home-Family-Child Environment Survey;

2. Conducting a pre-structured orientation session for the parents and guardians of all entering children at the beginning of the school year;

3. Conducting an annual orientation and family survey in the Fall of the year for families of children who have been in the program for at least one year.

4. Securing contracts of participation from each child's family.

PHASE II - DIAGNOSIS OF BASIC SKILLS LEARNING DIFFICULTIES

As stated in the introduction our children are held accountable for skills which may or may not be taught to them. Fair or unfair, research has shown that to be true. In the Home-School Partnership Model we have found that the structure of our approach (affection rather than cognition) has not lent itself to prescribing what, when and how a subject should be taught. Therefore, to facilitate the work of our children, aides and parents we have identified some of those skills.

We hypothesized that there are many specific skills for which children are held accountable. They may appear in basals, be teacher made, or be a part of a standardized or commercial instrument. However, they may all be

capsulized and narrowed to a manageable size. Choices had to be made among the many tests available. One consideration was that there must be both reading and mathematics batteries available or that either be currently utilized by our local sites. Major tests reviewed and skills required included, Stanford, Metropolitan, Iowa, California and STEP. We also reviewed the Ginn and the Open-Court basal series. Five (5) major skills categories were identified (Phonic Analysis, Visual Discrimination, Sound Matching, Structural Analysis and Comprehension) as inherent in each of the tests or programs for kindergarten through third grade. The sixty-three sub-skills of the DTA transcend each grade level and are different only by degree of complexity and may be used progressively.

A list of basic skills for reading and math were then developed for each grade level. The lists are comprised of those skills which are generally accepted as appropriate for mastery by the "typical" student (using an acceptable norm) in that particular grade. The lists have been agreed upon by the Local Education Agency (LEA) and the HSPM Sponsor staff. After the initial agreement, the basic skills lists were critiqued by representatives of both parties and will be reviewed continually over the first two years of implementation.

The DTA Progress Chart, which is compatible with the basic skills list, was developed. This checklist allows for the recording of the following information:

1. The name of a single student;
2. The child's current grade level (pre-printed);
3. The classroom teacher's name;
4. The home teacher's name;
5. The school;
6. The district;
7. The city/state (site); and
8. The date of entry.

The Progress Chart also has a scale for recording the level of learning difficulty for each skill (i.e., severe, moderate, slight, none).

In order to properly diagnose the child's current level of achievement with regard to basic skills and to prepare to plan for a program of diagnostic targeted assistance, it is necessary to begin with lists of minimum basic skills as mentioned above. These lists are the critical items around which the Criterion-Referenced Diagnostic Tests are developed for measuring those skills which the child has mastered and those skills with which he is experiencing learning difficulties.

In summary, Phase II highlights three important aspects of the total DTA process as indicated below:

1. Lists of minimum basic skills in reading and math for each grade level under consideration must be mutually agreed upon by the LEA and the HSPM staff.

2. a. Criterion-Referenced Diagnostic Pre-tests/Post-tests developed by the HSPM sponsor staff for the basic skills lists for each grade level.

   b. The pre- and post-tests are administered in the early Fall and late Spring respectively.

3. Along with the development of each test is the design of a distinct scheme for analyzing the results of each test and for properly interpreting the results. The importance lies with the classroom teacher being the final word for interpretation of the pre-diagnosis.

PHASE III - ANALYSIS AND CLASSIFICATION OF BASIC SKILLS LEARNING DIFFICULTIES

An analysis is made for each skill on the tests taken by a given child as indicated in item 3 above. The results are recorded on the progress chart. The DTA Progress Chart is placed in the child's folder. Each child's folder also contains his Home-Child-Family profile. Phase III involves the final

preparation for planning a targeted assistance process for each child.

It is not with careless abandonment that we take the attitude of relying solely on the classification and diagnosis of the classroom teacher. After all, who else is there? We do expect that whatever is diagnosed and whatever the classification that the teacher has indicated her expectations of that HSPM child.

PHASE IV - PLANNING FOR DIAGNOSTIC TARGETED ASSISTANCE

Once a Home-Family-Child profile has been developed for each child and the child's basic skills levels have been diagnosed in the areas of reading and math, an individualized targeted assistance program is outlined in both curriculum areas for the entire year. The first month of program is carefully detailed. The plans center around the classroom teacher's utilization of the home teacher in the classroom and the home to help each child achieve the projected goals which are necessary for his educational growth according to teacher/parent expectations.

Phase IV requires that the classroom teacher supervise, approve and plan the schedule of activities that will occur in the classroom. The home activities are planned jointly by the classroom teacher, the Home-School Coordinator, the home teacher and the parent.

PHASE V - IMPLEMENTATION OF DIAGNOSTIC TARGETED ASSISTANCE

If the DTA process is to be implemented successfully, it requires the support of a number of key groups and key persons. However, other than the classroom teacher, no other single group or person's role is more critical than that of the home teacher. The home teacher is the chief facilitator at

the implementation level and is directly responsible for the potential success level of the parents involved.

The following steps are taken in order to aid the home teacher in the effective discharge of her duties; to provide an optimum level of targeted assistance for each child and to insure the effectiveness of the process:

1. The home teacher is trained to use existing activities in the HSPM Resource Activities Skills Banks.
2. The home teacher is trained in the development of additional materials for the skills banks.
3. The home teacher is guided in the keeping of accurate records of the targeted assistance activities.
4. The home teacher receives training in evaluating her own responsibilities and activities.

Therefore, the home teacher is primarily responsible for Phase V under the supervision of the classroom teacher and Home-School Coordinator and with the cooperation of parents.

PHASE VI - EVALUATION OF CHILD RESPONSES

The major objective of the DTA Process is to impact on the child's educational growth pattern in a positive way. The impact should be reflected in both the cognitive and affective domains. The cognitive domain should reflect unambiguous measurable results. Periodic results of this process should be measured during its implementation. Therefore, appropriate criterion-referenced tests are administered monthly to assess the mastery of skills on which the targeted assistance activities have concentrated during that month. After this assessment has been completed the following steps are taken:

1. Recording the child's level of progress on the monthly Home Activity Record.

2. Planning the appropriate targeted assistance activities for the next month based on the child's progress and the program that has been outlined for him for the year.

As the facts dictate, revision of the program outline is on-going for the year as well as at the end of any given month. The monthly assessment is a vital part of the implementation of the DTA Process. Phase VI is the final phase of the process and regenerates the cycle to provide continuity of service to the child.

Post test results either standardized or teacher assessed may serve as an indicator of mastery or remaining difficulties. The post test results serve as a basis for the utilization of the HSPM Summer Learning Packet: An Effective Guide for Individualized Home Instruction for Parent and Child by Follins, Humphrey and Johnson, 1977. Studies have shown that children tend to "loose" certain skills during the summer months. The simplified skills related games and activities in the booklet were developed in an effort to help the parent provide enrichment, extended practice or remediation for their children.

The booklet is color coded and skill coded according to the HSPM Reading and Math Curriculum Guide, Bussey, Follins and Humphrey, 1975 in cooperation with New York and Nashville classroom teachers and home teachers. The games are designed on four levels (K-3) and with activities in reading and math. The games come with instructions but may be used in as many ways as parents desire. Parents are encouraged to use the games progressively. Weekly checklist are provided as an informal assessment for parents.

The weekly checklists are used by the home teacher at the beginning of the next school year as a continuity measure for the child's next classroom teacher.

EVALUATION OF THE HSPM DTA PROCESS

This process was carefully planned and organized on the basis of accepted theories. There is a need to evaluate the effectiveness of this process at each local site annually. This evaluation involves assessments on the part of all key groups and key persons involved. The following persons and groups will be assessed or will assess the DTA by means of the instrument or method(s) indicated below:

Group or Person	Instrument or Method
Classroom Teacher	HSPM Classroom Teacher Assessment of Paraprofessionals Form (15A, Revised)
Home-School Coordinator (HSC)	HSC Assessment Survey (CC25 Revised) and HSC Quarterly Classroom Observation Report
Parent	HSPM Parent-Implemented Survey
LEA	LEA Cognitive Assessment of Children with proper control groups and LEA Affective Assessment of Children
HSPM Sponsor Staff	A compilation of all assessments with interpretation

In addition, an ex post facto design will be employed though quasi-experimental in nature because the Sponsor has no control over classroom assignment. The children's established standardized achievement scores are used as a before treatment control or exposure to the Diagnostic Targeted Assistance Process with prescribed home-teaching to eliminate or reduce basic skills learning difficulties. The control children receive the same instruction as the treatment children within the same classroom but do not receive the home intervention. The design looks at the reduction or elimination of difficulties on a post test basis. The level of effective DTA implementation by aides, teachers and parents will also be used as controls and as factors for determining DTA success.

Children's improvement over-time within a given school year will be considered a definite measure of success. The number of children requiring enrichment as opposed to remediation at the end of the year is also considered a predictor of qualitative impact of parents on their child's learning.

OPERATIONAL PLAN FOR HSPM DTA PROCESS

Phase with Specific Activities	Frequency of Occurrence	Person(s) or Agency Responsible
A. Survey of Home-Family-Child Environment		
1. Conduct initial Home-Family-Child Survey	Entry level/ Annually	Local site staff
2. Conduct initial orientation session for entering families	Entry level/ Annually	HSPM Sponsor staff/ Local Staff
3. Conduct annual family survey (update) annual orientation session.	Early fall/ Annually	HSPM Sponsor staff/ Local staff
B. Diagnosis of Basic Skill Learning Difficulties		
1. Determine minimum continuum basic skills to be mastered in reading and math.	One--review periodically	Local District Curriculum staff/ HSPM Sponsor staff
2. Administer Criterion-Referenced Diagnostic Pre-test (Mastery) in reading and math.	Annually-- First month of school year	Home Teacher under supervision of classroom teacher
3. Determine a scheme for analyzing the results of the pre-tests.	Once--review periodically	Local site evaluation staff/local district staff/HSPM sponsor staff
C. Analysis and Classification of Basic Skills Learning Difficulties		
1. Analyze the results of the Criterion-Referenced Pretest for each child.	Annually-- First month of school	Home teacher under supervision of classroom teacher
2. Classify identified basic skills learning difficulties for each child by skill and degree of severity.	Annually-- First month of school	Classroom teacher
3. Initiate a record-keeping system in the classroom for each child to contain information in (1) and (2) and a brief home-family child profile.	Annually-- First month of school	Home teacher under supervision of classroom teacher

OPERATIONAL PLAN FOR HSPM DTA PROCESS

Phase with Specific Activities	Frequency of Occurrence	Person(s) or Agency Responsible
D. Planning of Diagnostic Targeted Assistance		
1. Conduct an orientation conference with classroom teacher and home teacher to discuss profile and analysis developed for each child	Annually--First month of school	Home-School Coordinator/Local District staff/ HSPM Sponsor staff
2. Organize and assign home teacher's responsibilities and schedule for targeted assistance to be given in the classroom (try to do this for a typical week.)	Monthly	Classroom Teacher
3. Develop a schedule for home teachers targeted assistance in the home (try to do this for a typical two-week period).	Monthly	Home teacher/HSC in cooperation with CRT
E. Implementation of Diagnostic Targeted Assistance		
1. Train home teachers to use materials in the resource activities skill banks and (train them) to develop additional materials for these banks.	On-going	HSPM Sponsor staff/ Local District staff
2. Home teachers are to carry out assigned responsibilities as scheduled, and they are to date and maintain records of targeted assistance activities for each child's folder.	On-going	Home Teacher
F. Evaluation of Child Responses		
1. Administer appropriate (monthly) Criterion-Referenced Tests for mastery; assess, record the results, and place the same in each child's folder on the DTA Progress chart.	Monthly	Classroom teacher/ parent/Home teacher under supervision of classroom teacher
2. Discuss child's progress chart with parent(s)		Home Teacher
3. The classroom teacher and home teacher are to discuss the child's progress over the past month.	Monthly	Classroom Teacher/ Home Teacher
4. Classroom teacher should work with the home teacher and the Home-School Coordinator to appropriately assign the responsibilities and schedules of the home teacher in the classroom and in the home for the next month and determine the need for additional time with particular skills.	Monthly	Classroom Teacher

RECOMMENDATIONS

The HSPM Diagnostic Targeted Assistance Process, while having promise, as of yet, has not been refined. The initial details and structure have been painfully worked through with practitioners in the field. The intent of the design if formative and requires further evaluation and work.

We hope to see the true test of the process at the end of 1978-79 school year when "teachers" have completed their post diagnostic analysis and are able to report the strengths and weaknesses of the process. It is hoped that with further refinement and standardization of the skills and associated activities the DTA will serve as an invaluable tool to assess the quantitative and qualitative impact of at-home teaching.

GLOSSARY

BASIC SKILLS--A list or category of skills, especially in reading and mathematics, that are considered very important or necessary to master for any further meaningful development of one's academic abilities.

BASIC SKILLS DIFFICULTIES--Clearly identified non-mastery (of varying degrees) of certain skills that are considered basic.

CRITERION-REFERENCED TEST--An instrument that evaluates a child's performance in terms of an absolute or specific criterion that has been set; an instrument which evaluates a child's performance in terms of whether he has achieved or has failed to achieve specific teaching objectives.

DIAGNOSTIC TEST--An instrument which determines the extent to which children have attained certain educational objectives; specific skills.

DTA CONTACT TEACHER--Volunteer or assigned teacher from each grade level who has accepted the responsibility of providing additional training and guidance for teachers within the schools using the DTA Process. These teachers received additional training in implementation of the process. They are "master teachers."

HOME-SCHOOL COORDINATOR--The professional hired on an administrative level to assist the local director in complete implementation of the Clark College Home-School Partnership Model for Follow Through; serves as a liaison between the central office and the school personnel in his district; conducts paraprofessional in-service training; coordinates and supervises the activities of the staff at the district level and provides on-going feedback to the local director.

HOME-TEACHER--Non-pedagogical personnel trained to assist the teacher in classroom activities and to instruct parents in the making and use of educational materials in the home.

TARGETED ASSISTANCE--Planned academic activities designed to attain specific educational objectives (primarily, the attainment of certain skills) within a specific time frame.

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*Marie Richardson - Classroom Teacher/3rd grade-New York
Evelyn Claiborne - Instructional Facilitation Home-School Coordinator-New York
Lillian Wilson - Social Services Home-School Coordinator-New York
Edward Jackson - Principal-New York
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*Sandra Cole - Classroom Teacher/2nd grade-Nashville
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